Refer to: MB:ST NE 0172

Dr. Richard Raymond Director Nebraska Department of Health and Human Services Finance and Support PO Box 95026 Lincoln, Nebraska 68509

Dear Dr. Raymond:

I am pleased to inform you that your request to renew Nebraska's Home and Community-Based Services Waiver for Adults with Mental Retardation or Related Conditions authorized under the provisions of Section 1915(c) of the Social Security Act has been approved. This waiver has been assigned control number 0172.90.R2.

Based on the assurances and additional information provided, the waiver renewal request is approved for a 5-year period, effective October 1, 2000 to September 30, 2005.

The following estimates of utilization and cost of waiver services have been approved:

	<u>C X</u>	<u>D</u>	<u>Total</u>
(10/01/00 - 09/30/01) Year 1	2,500	\$32,298	\$80,744,619
(10/01/01 - 09/30/02) Year 2	2,500	\$34,775	\$86,936,664
(10/01/02 - 09/30/03) Year 3	2,500	\$37,429	\$93,571,746
(10/01/03 - 09/30/04) Year 4	2,500	\$40,288	\$100,719,987
(10/01/04 - 09/30/05) Year 5	2,500	\$43,386	\$108,464,351

This waiver renewal request conforms to the requirements of the statute and Medicaid regulations. We appreciate the effort and cooperation provided by your staff.

Sincerely,

Joe Tilghman Regional Administrator

cc: Bob Seiffert

Lloya Fritz

Sharon Taggart

bcc: M J Duckett, CO

Doug Hinton Barbara Cotterman

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